

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

1072871-

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2						
3						
4						
5	3					
6	3					
7						
8	3					
9	3					
10	1					
11	①					
12	11					
13	1					
14	①					
15	1					
16	②					
17	①					
18	1					
19	1					
20	1					
21	1					
22	3					
23	3					
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50						
TOTAL IND.	2					
TOTAL DEP.	33					
TOTAL CLAIMS	25					

IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					